

POSITION	ID NO.	DATE
CLASSIFIER	10	5-24-91
EXAMINER	76	5-28-91
TYPIST		5-28-91
VERIFIER	V20	5/30/91
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

INDEX OF CLAIMS

Final	Claim	Date
Original	51	5/24/91
50	50	
49	49	
48	48	
47	47	
46	46	
45	45	
44	44	
43	43	
42	42	
41	41	
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8	8	
7	7	
6	6	
5	5	
4	4	
3	3	
2	2	
1	1	
100	100	

SYMBOLS

0 - (Through number) Deleted

1 - Deleted

2 - Deleted

3 - Deleted

4 - Deleted

5 - Deleted

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9 - Deleted

10 - Deleted

11 - Deleted

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100 - Deleted

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6	6	
5	5	
4	4	
3	3	
2	2	
1	1	
100	100	

(LEFT INSIDE)